

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 8/356,229 FILED OR DATE 19 DEC 1994
APPLICANT(S) NILSSON

CLAIMS	AS FILED				AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.						
	1		1											
1	1		1						51					
2		1		1					52					
3		1		1					53					
4		1		1					54					
5		1		1					55					
6		1		1					56					
7		1		1					57					
8		1		1					58					
9		1		1					59					
10		1		1					60					
11		1		1					61					
12		1		1					62					
13		1		1					63					
14	1		1						64					
15	1		1						65					
16	1		1						66					
17									67					
18									68					
19									69					
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38									88					
39									89					
40									90					
41									91					
42									92					
43									93					
44									94					
45									95					
46									96					
47									97					
48									98					
49									99					
50									100					
TOTAL IND.	3		3						TOTAL IND.					
TOTAL DEP.	14	1	13	1					TOTAL DEP.					
TOTAL CLAIMS	14	1	16	1					TOTAL CLAIMS					